

PERS

Select / Choice / Care

2010 Mail Service Incentive for Maintenance Medication			
Maintenance Medication	Retail Pharmacy Up to 30 – day supply* (one year = 12 fills)	Mail Service Up to 90 - day supply (one year = 4 fills)	Annual Member Cost Savings at Mail Service
Generic	\$5 x 2 Fills = \$10 \$10 x 10 Fills = \$100 Total Copayments = \$110	\$10 x 4 Fills = \$40	Total Savings = \$70
Preferred Brand	\$15 x 2 Fills = \$ 30 \$25 x 10 Fills = \$250 Total Copayments = \$280	\$25 x 4 Fills = \$100	Total Savings = \$180
Non-Preferred Brand	\$45 x 2 Fills = \$ 90 \$75 x 10 Fills = \$750 Total Copayments = \$840	\$75 x 4 Fills = \$300	Total Savings = \$540
Non-Preferred Brand With a Copay Waiver	\$30 x 2 Fills = \$ 60 \$45 x 10 Fills = \$450 Total Copayments = \$510	\$45 x 4 Fills = \$180	Total Savings = \$330
* Note: After the second fill of maintenance medication at your retail pharmacy, your copayment will increase to the mail service copayment level.			